

**COMBINED DECLARATION AND POWER OF ATTORNEY**

ATTORNEY DOCKET NO

As a below named inventor, I/we hereby declare that:

My/our residence, post office address and citizenship are as stated below next to my/our name. I/we believe I am/we are the original, first and sole/joint inventor/s of the subject matter which is claimed and for which a patent is sought on the invention entitled

**ISOLATED PHOTOPROTEIN MTCLYTIN, AND USE THEREOF**

the specification of which is attached hereto,

or was filed on September 3, 2004

as a PCT Application Serial No. PCT/EP2004/009843

I/we hereby state that I/we have reviewed and understand the contents of the above-identified specification, including the claims.

I/we acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I/we hereby claim priority benefits under Title 35, United States Code, §119 and § 119(e)(1) of any foreign and/or U.S. provisional application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

103 42 670.1  
(Number)

Germany  
(Country)

September 18, 2003  
(Month/Day/Year Filed)

I/we hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I/we acknowledge the duty to disclose the material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

  

(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

I/we hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Le A 36 839-US

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Jeffrey M. Greenman, Reg.No. 26,552  
 Tilman Breitenstein, Limited Recognition under 37 C.F.R. § 11.9(b)  
 Jerrie L. Chin, Reg. No. 41,670  
 William F. Gray, Reg. No. 31,018  
 Susan M. Pellegrino, Reg. No. 48,972  
 Barbara A. Shimei, Reg. No. 29,862

Address all written correspondence to Customer No. 35969 Mr. Jeffrey M. Greenman Bayer Pharmaceuticals Corporation 400 Morgan Lane West Haven, Connecticut 06516		Direct Telephone Calls To:  (203)812-3964(Jerrie L. Chin)	
FULL NAME OF SOLE OR FIRST INVENTOR GOLZ, Stefan		INVENTOR'S SIGNATURE <i>[Signature]</i>	DATE 23.03.06
RESIDENCE 45326 Essen, Germany		CITIZENSHIP German	
POST OFFICE ADDRESS Bückmannsmühle 46, 45326 Essen, Germany			
FULL NAME OF SECOND INVENTOR MARKOVA, Svetlana		INVENTOR'S SIGNATURE <i>[Signature]</i>	DATE 10.04.06
RESIDENCE 660036 Krasnoyarsk, Russia		CITIZENSHIP Russian	
POST OFFICE ADDRESS Akademgorodok 12a-68, 660036 Krasnoyarsk, Russia			
FULL NAME OF THIRD INVENTOR BURAKOVA, Ludmila		INVENTOR'S SIGNATURE <i>[Signature]</i>	DATE 10.04.06
RESIDENCE 662500 Sosnovoborsk, Russia		CITIZENSHIP Russian	
POST OFFICE ADDRESS Solnechnaya St. 9-32, 662500 Sosnovoborsk, Russia			
FULL NAME OF FOURTH INVENTOR FRANK, Ludmila		INVENTOR'S SIGNATURE <i>[Signature]</i>	DATE 10.04.06
RESIDENCE 660036 Krasnoyarsk, Russia		CITIZENSHIP Russian	
POST OFFICE ADDRESS Akademgorodok 19-82, 660036 Krasnoyarsk, Russia			
FULL NAME OF FIFTH INVENTOR VYSOTSKI, Eugene		INVENTOR'S SIGNATURE <i>[Signature]</i>	DATE 10.04.06
RESIDENCE 660100 Krasnoyarsk, Russia		CITIZENSHIP Russian	
POST OFFICE ADDRESS Lado Kechoveli St. 35-108, 660100 Krasnoyarsk, Russia			
FULL NAME OF SIXTH INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF SEVENTH INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			

Le A 36 839-US

RECEIVED  
CENTRAL FAX CENTER

MAY 16 2007

ATTY. DOCKET: Le A 36 839

Form PTO-1595 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002) Tab settings    ▼ ▼ ▼ ▼ ▼ ▼ ▼		<b>RECORDATION FORM COVER SHEET</b> <b>PATENTS ONLY</b> U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office				
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.						
1. Name of conveying party(ies): <p style="text-align: center;">- SEE ADDENDUM -</p> Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No		2. Name and address of receiving party(ies) Name: <u>BAYER HEALTHCARE, AG</u> Internal Address: _____ _____ Street Address: <u>D-51368 LEVERKUSEN</u> <u>GERMANY</u> City: _____ State: _____ Zip: _____ Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: <u>- SEE ADDENDUM -</u>						
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: _____ A. Patent Application No.(s) <u>10/572,195</u> B. Patent No.(s) _____ Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Jeffrey M. Greenman</u> Internal Address: <u>Law &amp; Patents</u> <u>Bayer Pharmaceuticals Corporation</u> _____ Street Address: <u>400 Morgan Lane</u> _____ City: <u>West Haven</u> State: <u>CT</u> Zip: <u>06516</u>		6. Total number of applications and patents involved: <u>1</u> 7. Total fee (37 CFR 3.41).....\$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: <u>13-3372</u> (Attach duplicate copy of this page if paying by deposit account)				
<b>DO NOT USE THIS SPACE</b>						
9. Statement and signature. <i>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.</i> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;"> <u>William F. Gray</u>            Name of Person Signing         </td> <td style="width: 33%; text-align: center;">             Signature         </td> <td style="width: 33%; text-align: center;"> <u>16 May 2007</u>            Date         </td> </tr> </table> Total number of pages including cover sheet, attachments, and documents: <u>3</u>				<u>William F. Gray</u> Name of Person Signing	 Signature	<u>16 May 2007</u> Date
<u>William F. Gray</u> Name of Person Signing	 Signature	<u>16 May 2007</u> Date				

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. 1.8: I hereby certify that this correspondence and any papers referred to as attached are being facsimile transmitted to the US Patent and Trademark Office, Assignments Division, facsimile number (571) 273-0140

MAY 16 2007

**RECORDATION FORM COVER SHEET**  
(Form PTO-1595)**ADDENDUM**

Page 1 of 1

Patent Application Serial Number:

10/572,175

Filing Date (Month/Day/Year):

09/03/2004

Attorney Docket Number:

LeA 36 839

Conveying Party (family name followed by given name)	Execution Date (Month/Day/Year)
GOLZ, Stefan	March 23, 2006
MARKOVA, Svetlana	April 10, 2006
BURAKOVA, Ludmila	April 10, 2006
FRANK, Ludmila	April 10, 2006
VYSOTSKI, Eugene	April 10, 2006

# Assignment

RECEIVED  
CENTRAL FAX CENTER

MAY 16 2007

For valuable consideration, the receipt and adequacy of which is hereby acknowledged,

I/We

1) GOLZ, Stefan 2) MARKOVA, Svetlana 3) BURAKOVA, Ludmila  
4) FRANK, Ludmila 5) VYSOTSKI, Eugene

1) Bückmannsmühle 46, 45326 Essen, Germany  
2) Akademgorodok 12a-68, 660036 Krasnoyarsk, Russia  
3) Solnechnaya St. 9-32, 662500 Sosnovoborsk, Russia  
4) Akademgorodok 19-82, 660036 Krasnoyarsk, Russia  
5) Lado Kechovell St. 35-108, 660100 Krasnoyarsk, Russia

hereby sell, assign, and transfer unto Bayer HealthCare AG a corporation of Germany located at 51368 Leverkusen, Germany the entire right, title, and interest in and to my/our application for Letters Patent of the United States, executed concurrently herewith, entitled

## ISOLATED PHOTOPROTEIN MTCLYTIN, AND USE THEREOF

Filed: September 3, 2004

PCT-Serial No.: PCT/EP2004/009843

and my/our entire right, title, and interest in and to all my/our inventions, whether joint or sole, disclosed in said application for Letters Patent, and in and to all divisional or continuation applications that may be filed for United States Letters Patent for any of said inventions, and in and to all patents that may be granted on the foregoing applications, and I/we hereby agree, whenever requested, to communicate to said assignee, its successors and assigns, any facts known to my/us respecting said inventions and to execute all applications or papers necessary to obtain and maintain proper patent protection on said inventions in the United States.

Date/Datum

23.03.06

10.04.06

10.04.06

10.04.06

10.04.06

Inventor(s)/Erfinder

1.

2.

3.

4.

5.

Lc A 36 839-US